



A Public Service Agency

MOTORIZED BICYCLE INSTRUCTIONS/APPLICATION

Please read all sections before completing application.

| | | | |
|-------------------------------|---------------|------|--------------------------|
| VEHICLE IDENTIFICATION NUMBER | ENGINE NUMBER | MAKE | CALIFORNIA LICENSE PLATE |
|-------------------------------|---------------|------|--------------------------|

Mail completed application, **and** the applicable fees (*check or money order, please do not send cash*) to:

Department of Motor Vehicles
P.O. Box 942869
Sacramento, CA 94269-0001

- ☐ Complete **Sections A** and **D** for original application for license plate and ID Card.
☐ Complete **Sections B** and **D** to apply for duplicate ID Card and/or substitute license plate.
☐ Complete **Sections C** and **D** to transfer ownership.

Section A

Original application **\$6**

Answer the following questions "yes" or "no" to determine if your vehicle is a motorized bicycle:

- | | | |
|---|------------------------------|-----------------------------|
| 1. Two-wheel or three-wheel device? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Fully operative pedals for human power or powered solely by electrical energy? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Automatic transmission and a motor with less than 2 gross brake horsepower? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Maximum speed of 30 miles per hour on ground level? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered "Yes" to all four questions, complete the application below, in the appropriate sections.
If you answered "No" to any of the questions, your vehicle is not a motorized bicycle as defined by the California Vehicle Code §406. Complete Application for Registration (REG 343) to apply for appropriate registration.

An original application is one that is made if the vehicle has never been licensed in California (no California license plate or ID Card).

REGISTERED OWNER(S) (*Last, First, Middle*)

☐ AND

☐ OR

ADDRESS

COUNTY

CITY

STATE

ZIP

NOTE TO MOPED RETAIL SELLER: A statement of facts indicating that you are a retail seller of mopeds is required with this application.

Section B

CHECK ONE:

- ☐ Substitute Plate **\$8**
☐ Duplicate ID Card **\$7**

Item(s) has/have been: (*Please check one*)

☐ Lost/Stolen ☐ Destroyed/Mutilated ☐ Surrendered to DMV

☐ Not Received: **I have furnished the Department of Motor Vehicles with my correct address and will return or destroy the original item(s), if received.**

Section C

☐ Ownership Transfer

\$5

The ID Card is the transfer document. If it is lost, complete Section B, sign Release of Ownership section (SELLER Signs) and have the new owner(s) complete the information in this section and sign on new owner signature line.

RELEASE OF OWNERSHIP

I hereby release interest in the vehicle:

RELEASING SIGNATURE OF SELLER

DATE

X

REGISTERED OWNER(S) (*Last, First, Middle*)

☐ AND

☐ OR

ADDRESS

COUNTY

CITY

STATE

ZIP

Section D

Certification and Signature(s)

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

DATE

SIGNATURE OF NEW OWNER

DAYTIME PHONE NUMBER

X

DATE

SIGNATURE OF NEW OWNER

DAYTIME PHONE NUMBER

X